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APPLICANTS

Xudong Fan, Austin, TX;
 Mark T. Anderson, Woodbury, MN;
 Craig R. Schardt, St. Paul, MN;

** CONTINUING DATA *****

none PR

** FOREIGN APPLICATIONS *****

none PR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Examiner's Signature <i>RAM</i> Initials <i>PR</i>				

ADDRESS

32692

TITLE

POROUS MICROSPHERE RESONATORS

FILING FEE RECEIVED 1224	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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